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## REISSUE PATENT APPLICATION TRANSMITTAL

PTO/SB/50 (02-51)  
17302  
10/6/03  
08/21/03

<b>Address to:</b>  <b>Assistant Commissioner for Patents Box Reissue Washington, DC 20231</b>	<b>Attorney Docket No.</b>	10159-RE (HPC-100US)
	<b>First Named Inventor</b>	Jacqueline K. Pease
	<b>Original Patent Number</b>	6,558,513 B1
	<b>Original Patent Issue Date (Month/Day/Year)</b>	05/06/2003
	<b>Express Mail Label No.</b>	EV333297810US

### APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

### APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
4. ☐ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No  
(If Yes, check applicable box(es))
  - ☒ Written Consent of all Assignees (PTO/SB/53)
  - ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all of the following are necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

### ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. ☐ Original U.S. Patent for surrender
  - ☐ Ribboned Original Patent Grant
  - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)  
(if applicable)
13. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
14. ☐ English Translation of Reissue Oath/Declaration  
(if applicable)
15. ☐ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
17. Other: Express Mail Certificate

### 18. CORRESPONDENCE ADDRESS



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<b>Name</b>	Gary A. Samuels		
<b>Address</b>	Hercules Incorporated - Hercules Plaza 1313 N. Market Street		
<b>City</b>	Wilmington	<b>State</b>	Delaware
<b>Country</b>	USA	<b>Zip Code</b>	19894-0001
		<b>Fax</b>	(302) 594-6998
	<b>Telephone</b>	(302) 594-6813	

<b>NAME (Print/Type)</b>	Frank P. Tise	<b>Registration No. (Attorney/Agent)</b>	50,379
<b>Signature</b>	<i>Frank P. Tise</i>	<b>Date</b>	August 21, 2003

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10159-RE (HPC-100US)

PTO/SB/56 (08-00)

Approved for use through 12/30/2000. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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# REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)  
10159-RE (HPC-100US)

## Claims as Filed - Part 1

Claims in Patent	For	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 35	Total Claims (37 CFR 1.16(j)) Independent Claims (37 CFR 1.16(i))	(B) 35	**** 0	X\$ _____	or	X=	
(C) 3		(D) 3	* 0	=		X=	
Basic Fee (37 CFR 1.16(h))				\$ _____			\$ 750
Total Filing Fee				\$ _____		OR	\$ 750

## Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	X\$ _____	or	X\$ _____	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	X\$ _____		X\$ _____	
Total Additional Fee					\$ _____		OR	\$ _____

\* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

\*\* If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

\*\*\* After any cancellation of claims

\*\*\*\* If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

\*\*\*\*\* "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 27 CFR 1.27.

☐ Please charge Deposit Account No. in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 18-0350.  
A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$750 to cover the filing / additional fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

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August 21, 2003

Date

Frank P. Tise, Reg. No. 50,379

Typed or printed name

**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**

Applicant(s): Jacqueline K. Pease and William A. Hendriks

Docket No.

10159-RE (HPC-100US)

Patent No.

6,558,513 B1

Issue Date

May 6, 2003

Examiner

Dean T Nguyen

Group Art Unit

1731

Invention: NON-AQUEOUS RELEASE FROM PAPER MACHINE EQUIPMENT

I hereby certify that the following correspondence:

Reissue Patent Application and related documents, IDS, Check #3375, Return Receipt Card

*(Identify type of correspondence)*

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Brandy Zak*(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)*EV 333297810US*("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**

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<h2 style="text-align: center;">TRANSMITTAL FORM</h2> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>	Patent Number	6,558,513 B1
	Issue Date	May 6, 2003
	First Named Inventor	Jacqueline K. Pease
	Art Unit	1731
	Examiner Name	Dean T. Nguyen
Total Number of Pages in This Submission	Attorney Docket No.	10159-RE (HPC-100US)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form 1449A (2pp), References (18)
<b>Remarks:</b>		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual	Frank P. Tise	Registration No. (Attorney/Agent)	50,379
Signature	<i>Frank P. Tise</i>		
Date	August 21, 2003		

CERTIFICATE OF TRANSMISSION / MAILING			
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Name (Print/Type)	Brandy Zak		
Signature	<i>Brandy Zak</i>	Date	August 21, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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